

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY  
STATUS (37 CFR 1.9(f) AND 1.27 (d)) - NONPROFIT ORGANIZATION**

Docket No.  
**LNRF.009**

01/23/98

**Serial No.**  
**08/895,203**

**Filing Date**

Patent No.

**Issue Date**

Applicant/  
Patentee: **Lloyd WOLFINBARGER**

**Invention: PROCESS AND COMPOSITION FOR CLEANING SOFT TISSUE GRAFTS OPTIONALLY  
TO BONE AND SOFT TISSUE AND BONE GRAFTS PRODUCED THEREBY**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

**NAME OF ORGANIZATION:** LIFENET RESEARCH FOUNDATION

**ADDRESS OF ORGANIZATION:** 5809 WARD COURT

---

**VIRGINIA BEACH, VA 23455**

**TYPE OF NONPROFIT ORGANIZATION:**



I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 C.F.R. 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- the specification to be filed herewith.
  - the application identified above.
  - the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the above-identified nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed on the next page and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- no such person, concern or organization exists.
- each such person, concern or organization is listed below.

FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input checked="" type="checkbox"/> Nonprofit Organization
FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization
FULL NAME	<hr/>		
ADDRESS	<hr/>		
	<input type="checkbox"/> Individual	<input type="checkbox"/> Small Business Concern	<input type="checkbox"/> Nonprofit Organization

Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: BILLY G. ANDERSON  
 TITLE IN ORGANIZATION: PRESIDENT & CEO  
 ADDRESS OF PERSON SIGNING: 5809 WARD COURT  
VIRGINIA BEACH, VA 23455

SIGNATURE: 

DATE: 1-15-98

ISSUED  
01/23/98

## ***DECLARATION AND POWER OF ATTORNEY FOR U.S. PATENT APPLICATION***

(X) Original    ( ) Supplemental    ( ) Substitute    ( ) PCT    ( ) Design

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**TITLE: PROCESS AND COMPOSITION FOR CLEANING SOFT TISSUE GRAFTS OPTIONALLY  
ATTACHED TO BONE AND SOFT TISSUE AND BONE GRAFTS PRODUCED THEREBY**

of which is described and claimed in:

( ) the attached specification, *or*

(X) the specification in the application Serial No. 08/895,203 filed July 16, 1997,

and with amendments through \_\_\_\_\_ (if applicable), *or*

( ) the specification in International Application No. PCT/\_\_\_\_\_, filed \_\_\_\_\_,

and as amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment(s) referred to above.

I acknowledge my duty to disclose information of which I am aware which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (and §172 if this application is for a Design) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NO.	DATE OF FILING	PRIORITY CLAIMED

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	U.S. FILING DATE	STATUS: PATENTED, PENDING, ABANDONED

And I hereby appoint Raymond C. Jones, Reg. No. 34,631 and Adam C. Volentine, Reg. No. 33,289, members of the firm of JONES & VOLENTINE, L.L.P., jointly and severally, attorneys to prosecute this application and to transact all business in the U.S. Patent and Trademark Office connected therewith.

I hereby authorize the U.S. attorneys named herein to accept and follow instructions from LIFENET RESEARCH FOUNDATION as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and myself. In the event of a change in the persons from whom instructions may be taken, the U.S. attorneys named herein will be so notified by me.

*Kindly direct all correspondence to:*     **JONES & VOLENTINE, L.L.P.**  
**12200 Sunrise Valley Drive**  
**Suite 150**  
**Reston, Virginia 20191**  
  
**Telephone (703) 715-0870**

Full Name of 1st Inventor	FAMILY NAME <b>WOLFINBARGER, Jr.</b>	FIRST GIVEN NAME <b>Lloyd</b>	SECOND GIVEN NAME
Residence & Citizenship	CITY <b>Norfolk</b>	STATE OR COUNTRY <b>Virginia</b>	COUNTRY OF CITIZENSHIP <b>U.S.A.</b>
Post Office Address	ADDRESS <b>1509 Cedar Lane, Norfolk, VA 23508</b>	CITY	STATE OR COUNTRY      ZIP CODE
Full Name of 2nd Inventor	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENSHIP
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY      ZIP CODE
Full Name of 3rd Inventor	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENSHIP
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY      ZIP CODE
Full Name of 4th Inventor	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME

Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENSHIP	
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
Full Name of 5th Inventor	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
Residence & Citizenship	CITY	STATE OR COUNTRY	COUNTRY OF CITIZENSHIP	
Post Office Address	ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE

I further declare that all statements made herein of my own knowledge are true, and that all statements on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

1st Inventor *Lloyd WOLFBARGER* Date *X 1/12/98*  
 Lloyd WOLFBARGER, Jr.

2nd Inventor \_\_\_\_\_ Date \_\_\_\_\_

3rd Inventor \_\_\_\_\_ Date \_\_\_\_\_

4th Inventor \_\_\_\_\_ Date \_\_\_\_\_

5th Inventor \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

Applicant Reference No.: \_\_\_\_\_

Atty Docket No.: *LNRF.009*